

JAMES SHACKELFORD MEMORIAL PARK

476 BROWN BRIDGE ROAD, AUBURN, GA 30011

Rental Agreement

*** FOR MULTIPLE DAYS, PLEASE ATTACH A BREAKDOWN OF THE SCHEDULE *
RESERVATIONS MUST BE MADE AT LEAST ONE WEEK IN ADVANCE**



Lessee Contact Information

CONTACT PERSON:		
BUSINESS NAME: <small>IF APPLICABLE</small>		
ADDRESS:		
CITY:	STATE:	ZIP:
CELLPHONE:	EMAIL:	

City of Auburn

Parks & Leisure Department
1411 Sunbelt Way
Auburn, GA 30011

Contact: Michael Parks
770-963-4002 Ext.230
parksdirector@cityofauburn-ga.org

Rental Information

Non-Profit Organization YES NO If you chose YES, then include Tax ID: _____

FILL OUT THE RENTAL DATE AND TIME BELOW:

Note: Some dates may not be available due to our priority ranking system and scheduling. Please choose 3 rental dates below:

RENTAL DATE	1ST CHOICE: / /	2ND CHOICE: / /	3RD CHOICE: / /
	RENTAL TIME	BEGIN: <input type="checkbox"/> AM <input type="checkbox"/> PM	END: <input type="checkbox"/> AM <input type="checkbox"/> PM

TYPE OF GATHERING:

Birthday Party Family Business/ Organization Gathering Other: _____

TERMS AND CONDITIONS

- Pavilions may only be rented from dawn until dusk. The park must be clear during the evening hours before dawn.
- All Non-Profit organizations must submit either tax ID number or proof of non-profit designation
- A \$35 NSF Fee is placed on each returned check
- A damage/cleanup deposit is required. The deposit will be 50% of entire facility rental cost. At the conclusion of the event the lessee is asked to leave the facility in a "ready to use" condition. Remove all decorations and garbage. The deposit is refundable if the event coordinator completes the checklist, finds the facility to be in good order and signs off on the agreement.
- Please ensure all lights are off and that all trash is in the proper trash receptacle.
- No alcoholic beverages are allowed.
- The City enforces State law regarding weapons on its properties and in its buildings.
- The rentals of the pavilions/shelters are available to persons over the age of 18.
- Deposit all waste in trash receptacles.
- Park all vehicles in designated areas only. The use of motor vehicles outside of designated areas is prohibited. The City of Auburn is not responsible for any loss or damage to items left in parked vehicles.
- As consideration for the use of the City of Auburn shelters/ pavilions/ gazebos, the undersigned agrees to indemnify and hold harmless The City of Auburn, Georgia, and its employees, officers, and agents from any and all claims and damages of any kind, including attorney's fees and expenses of litigation, relating to or arising from the undersigned's use of the City of Auburn shelters/ pavilions/ gazebos.
- Cancellation Policy: In order to be refunded your deposit and usage fee, the lessee must notify the Parks and Leisure Department five (5) business days prior to the event.

By signing the application below, I agree to abide by the following Terms and Conditions:

In consideration for rental of the premises, I understand, and agree to follow and comply with all above written guidelines which are incorporated herein by reference. Failure to comply with these guidelines will result in loss of privilege to use City facilities and will result in non return of deposit. I further understand that fundraising is not allowed on City property, and will not be using the facilities for that purpose unless I have written permission.

Signature: _____	Date: _____
Print Name: _____	
Title: _____	

**RENTAL FEES ARE DESIGNED TO
COVER COST OF UTILITIES AND
MAINTENANCE**

LARGE PAVILION RENTAL FEE

MINIMUM TWO HOURS OF USE PER DAY

- AUBURN CITIZENS/NON-PROFITS
_____ HRS X \$10.00 = \$ _____
- NON-CITIZENS
_____ HRS X \$15.00 = \$ _____

SMALL PAVILION RENTAL FEE

MINIMUM TWO HOURS OF USE PER DAY

- AUBURN CITIZENS/NON-PROFITS
_____ HRS X \$5.00 = \$ _____
- NON-CITIZENS
_____ HRS X \$10.00 = \$ _____

50% DEPOSIT REQ'D

A 50% DEPOSIT OF THE TOTAL RENTAL COST IS REQUIRED FOR ANY RENTAL

RENTAL DUE	\$
50% DEPOSIT	\$
TOTAL DUE	\$

OFFICE USE ONLY OFFICE USE ONLY OFFICE USE ONLY OFFICE USE ONLY OFFICE USE ONLY OFFICE USE ONLY OFFICE USE ONLY

Date Payment Received Security Deposit Due: 50% OF RENTAL <input type="checkbox"/> CK# _____ Rental Amout Due: __\$ _____ <input type="checkbox"/> CASH <input type="checkbox"/> CK/MO# _____	Rental Approved By: _____ Date Approved: _____ Date of Rental: _____ <input type="checkbox"/> Posted on Calendar <input type="checkbox"/> Relay Date to Renter	Building passed inspection? <input type="checkbox"/> YES <input type="checkbox"/> NO Return Security Deposit? <input type="checkbox"/> YES <input type="checkbox"/> NO Deposit Returned: _____ Staff Initials: _____ Customer survey returned? <input type="checkbox"/> YES <input type="checkbox"/> NO
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